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APPLICATION NO.	PPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			ATTORNEY DOCKET NO. CONFIRMATION NO.				
09/941,780	08/30/2001			Takeo Tsukamoto			35.C15727 7587				
TITLE OF INVENTION: ELECTRON-EMITTING DEVICE, ELECTRON-EMITTING APPARATUS, IMAGE DISPLAY APPARATUS, AND										US, AND	
LIGHT-EMITTING APP	PARATUS										
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EXAMINER			ART UNIT	CLASS-SUBCLASS							
VU, DAVID HUNG			2821	315-169300							
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Fitzpatrick, Cella,							
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a							
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customo Number is required.				(2) fits that to a single time for a same of up to registered attempts or agent) and the names of up to 2 registered patent attomeys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	A TO E	E PRINTED ON	THE PATENT (print or	r type	c)					
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed frecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
CANON KABUSH		TOKYO, JAPAN									
Please check the appropri	iate assignee category or	catego	ories (will not be p	rinted on the patent):		Individual XX C	orporatio	on or othe	r private g	oup entity Governmen	
4a. The following fee(s) a	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.										
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				overpayment, to D	epos	sit Account Numb	er _50	3939	_(enclose	an extra copy of this form).	
 Change in Entity State a. Applicant claims 	s SMALL ENTITY stat	us. See	37 CFR 1.27.	☐ b. Applicant is no	long	ger claiming SMA	LL ENT	TTY state	s. See 37 (CFR 1.27(g)(2).	
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if req records of the United St	uired)	will not be accepte ent and Trademark	d from anyone other the Office.	an th	ne applicant; a reg	istered a	ttorney o	r agent; or	the assignee or other party	
Authorized Signature	-7 A	1	<i>)</i> -			Date					
Typed or printed name	e Frank A. De	Luci	ia			Registration l	No4	2,476			
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